

QPS Quality Dashboard



July 19, 2019



COOK COUNTY
HEALTH

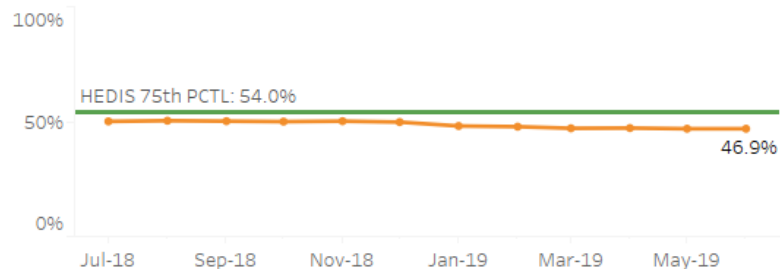


COOK COUNTY HEALTH

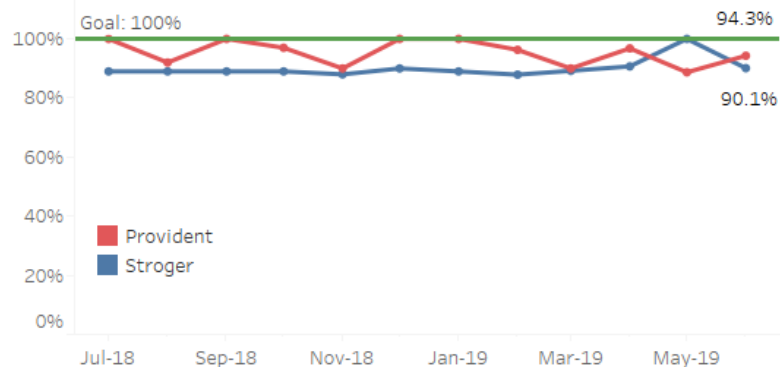
Quality Dashboard
July 19, 2019

Health Outcomes

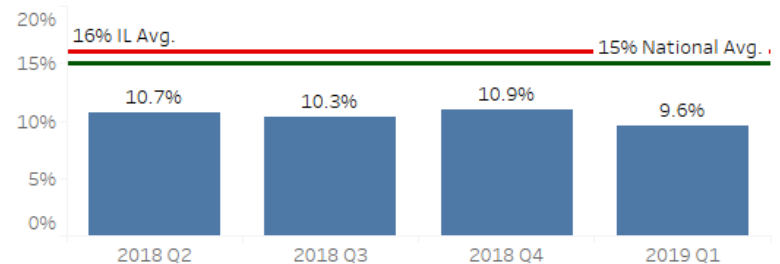
HEDIS - Diabetes Management: HbA1c < 8%



Core Measure - Venous Thromboembolism (VTE) Prevention

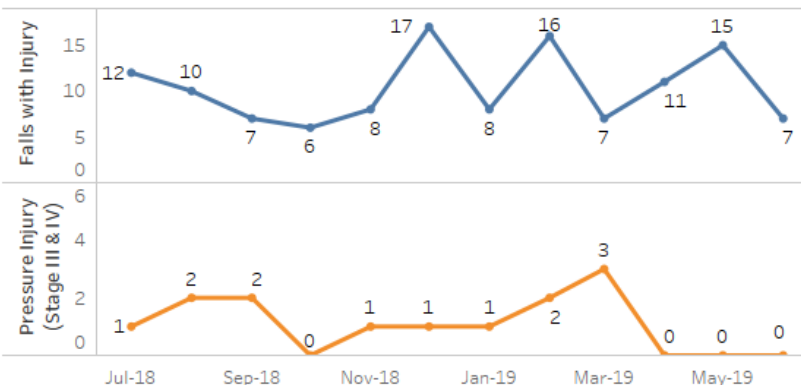


30 Day Readmission Rate

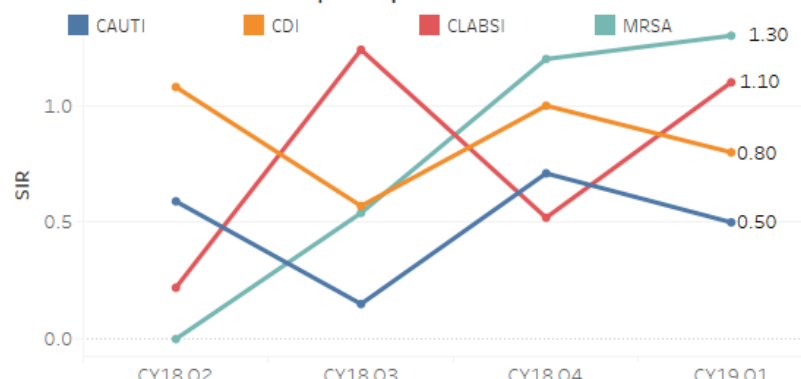


Patient Safety

Hospital Acquired Conditions



Hospital Acquired Infections

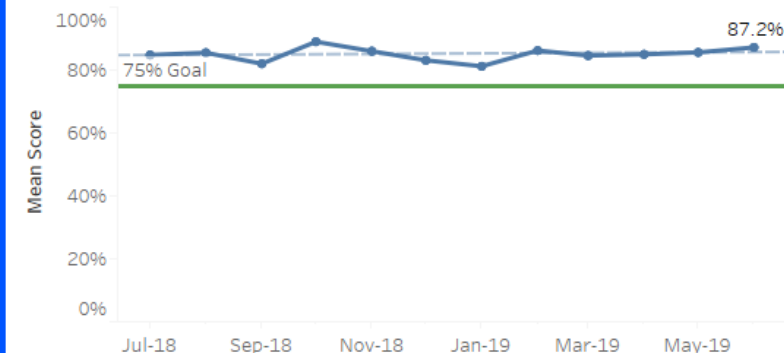


SIR (Standardized Infection Ratio) is a summary measure which compares the actual number of Healthcare Associated Infections (HAI) in a facility with the baseline data for standard population. SIR > 1.0 indicates more HAIs were observed than predicted, conversely SIR of < 1.0 indicates that fewer HAIs were observed than predicted.

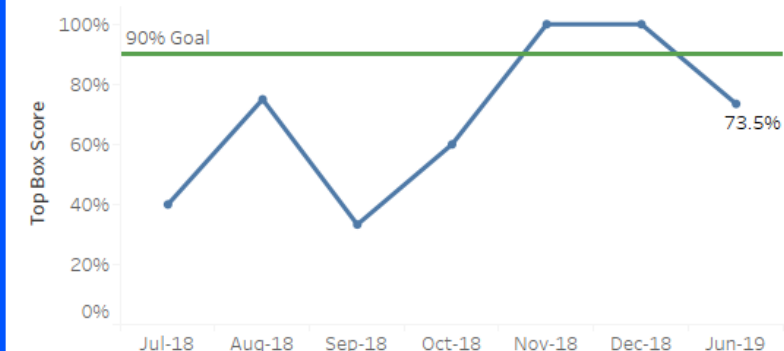
	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19
CAUTI	1	0	1	0	0	1	3	1	1	1	1	1
CDI	4	5	4	2	10	4	4	6	2	6	5	4
CLABSI	0	2	3	0	0	0	2	1	0	4	2	2
MRSA	0	0	1	0	0	1	0	1	0	1	0	0

Utilization

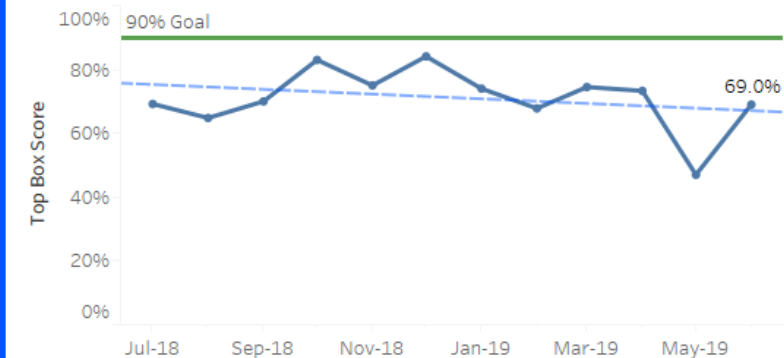
ACHN--Overall Clinic Assessment



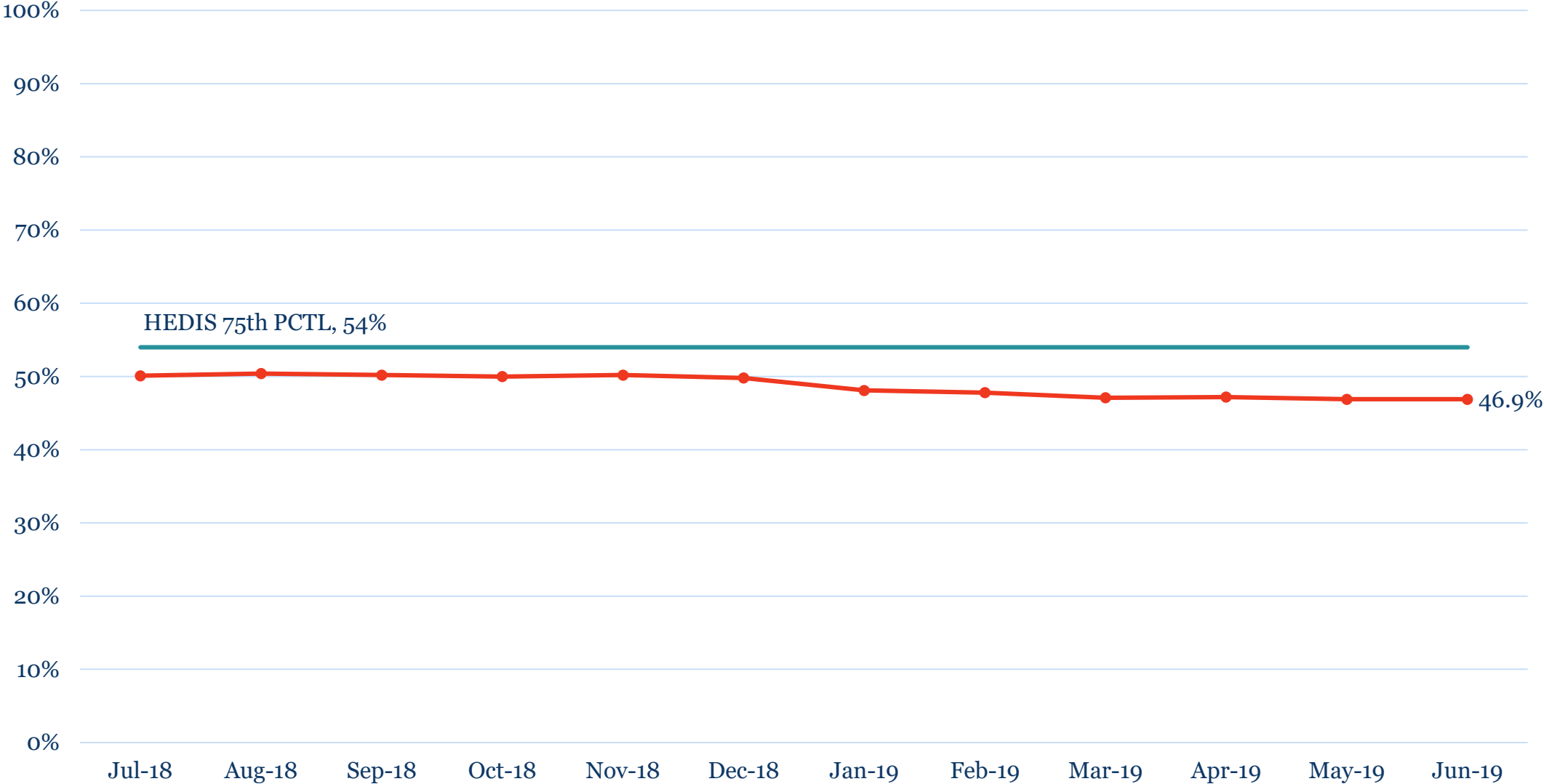
Provident--Willingness to Recommend Hospital



Stroger--Willingness to Recommend Hospital

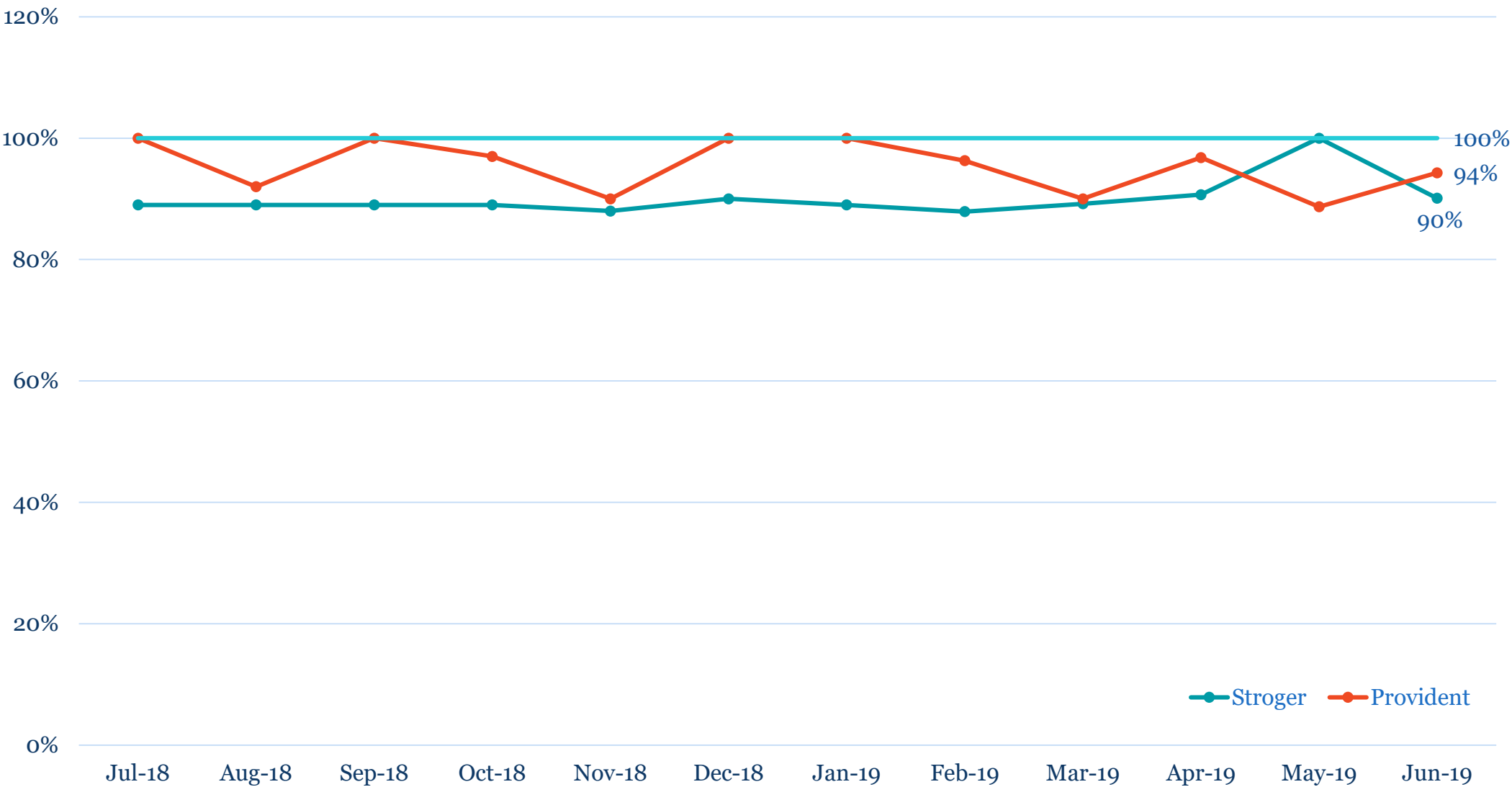


HEDIS – Diabetes Management: HbA1c < 8%



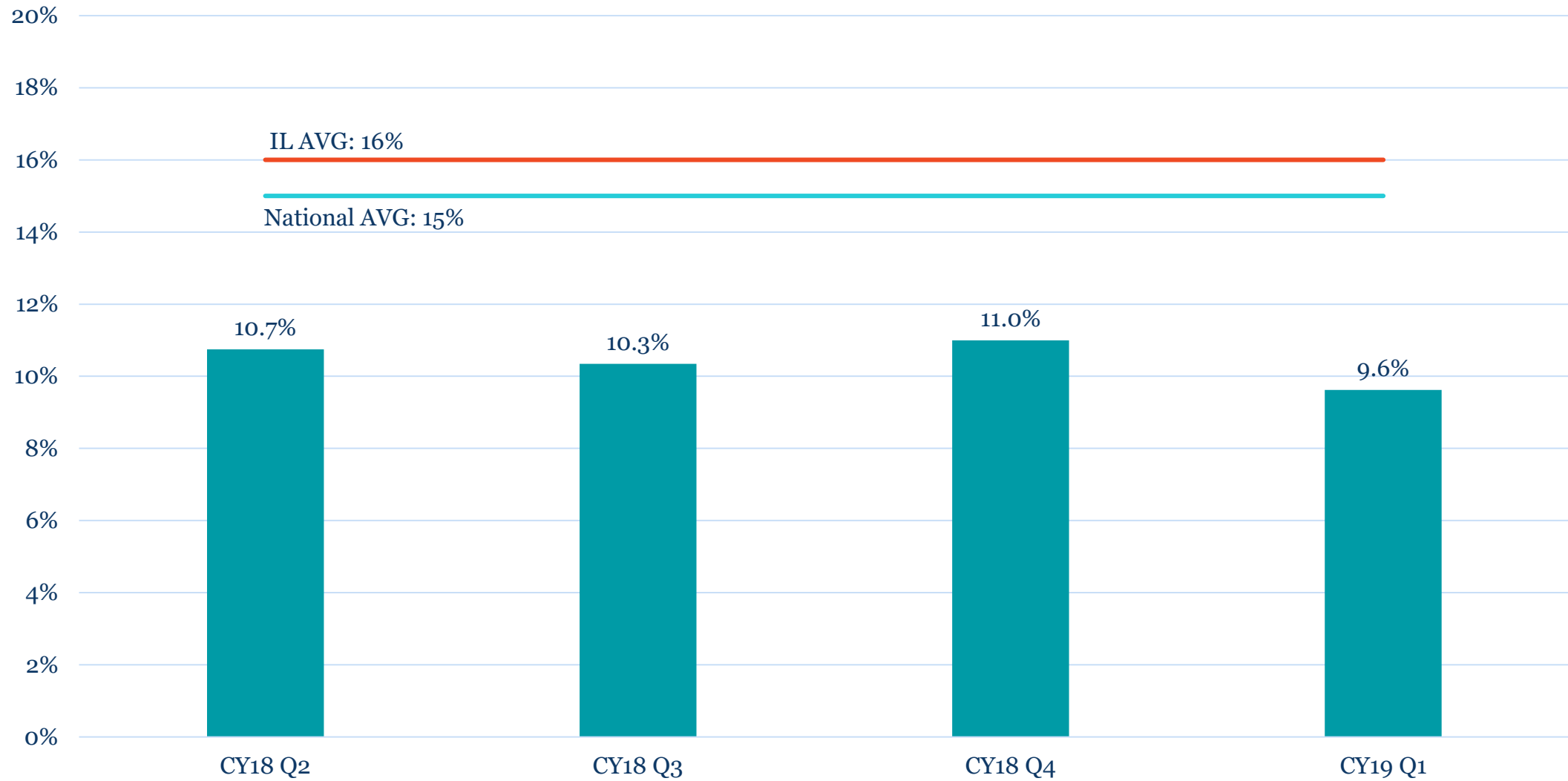
Source: Business Intelligence

Core Measure – Venous Thromboembolism (VTE) Prevention



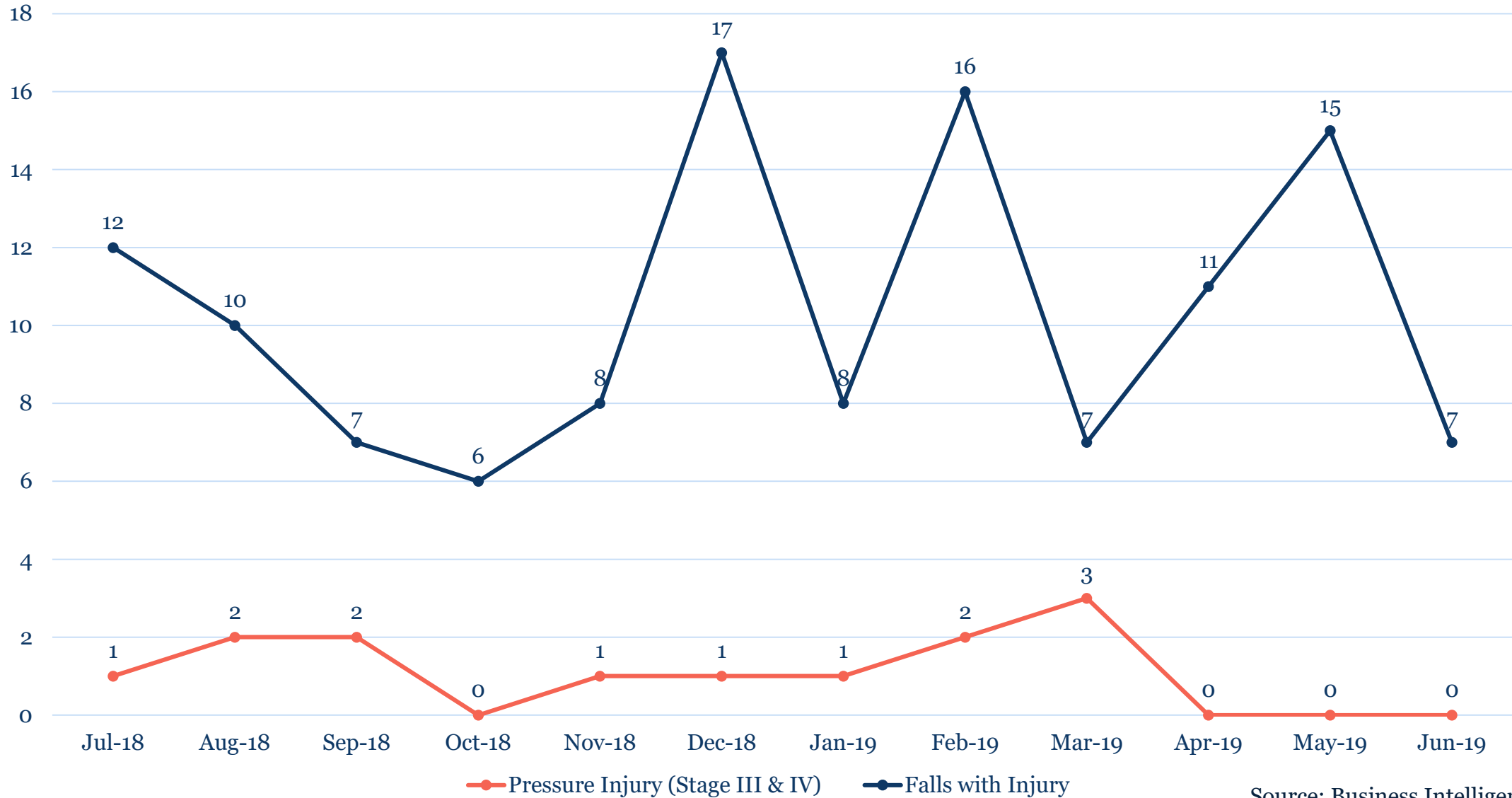
Source: Quality Dept.

30 Day Readmission Rate



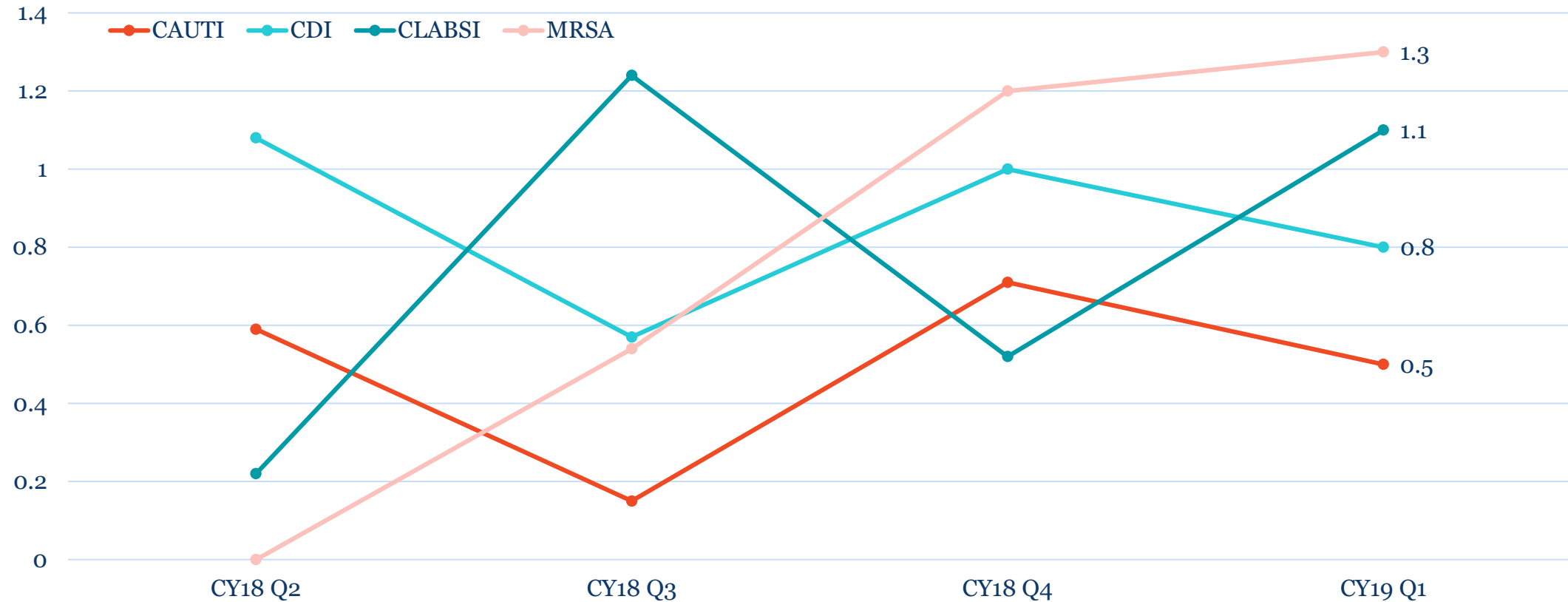
Source: Business Intelligence

Hospital Acquired Conditions



Source: Business Intelligence

Hospital Acquired Infections



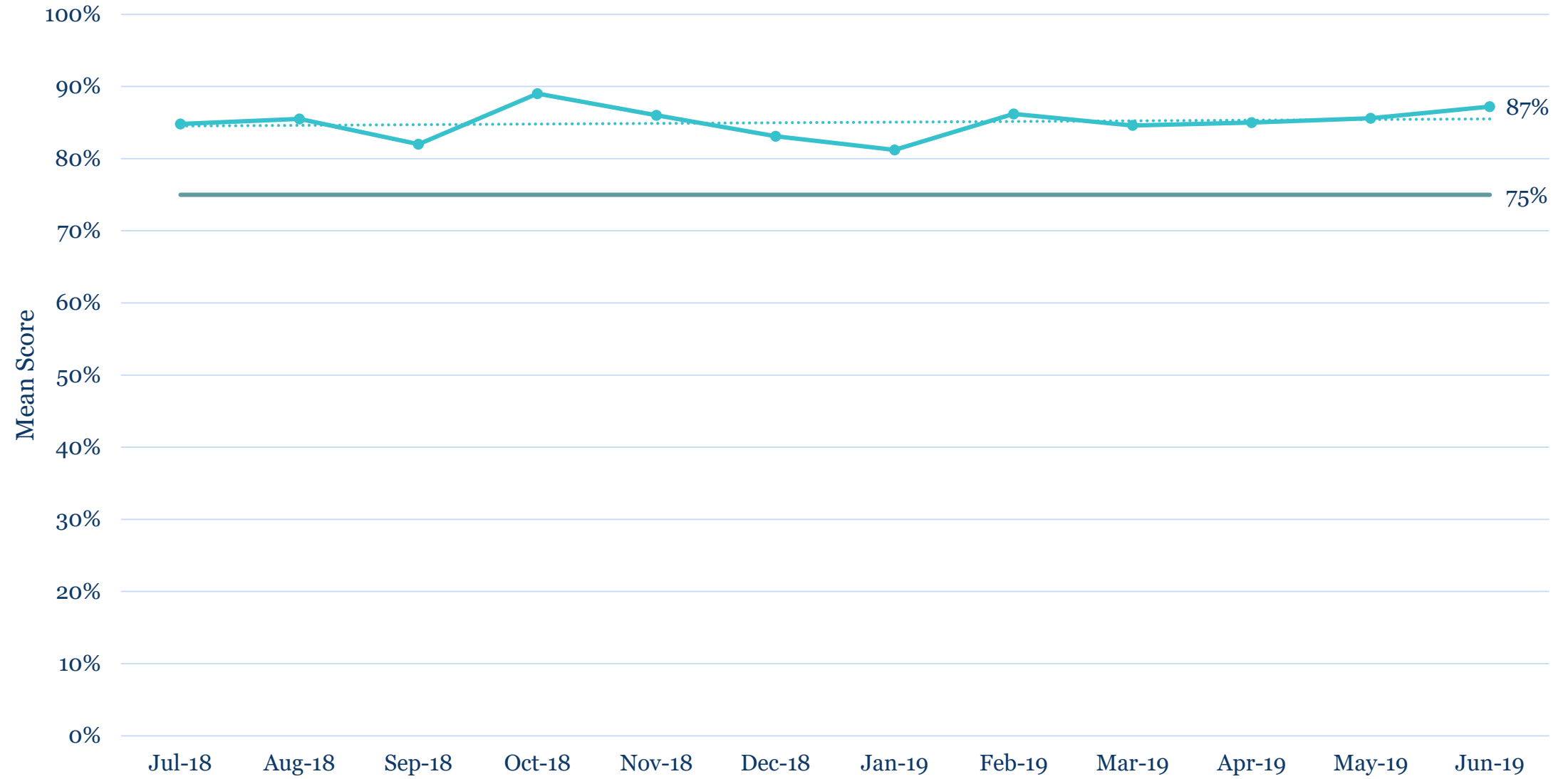
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MRSA	0	0	1	0	0	1	0	1	0	1	0	0

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Source: Infection Control Dept.

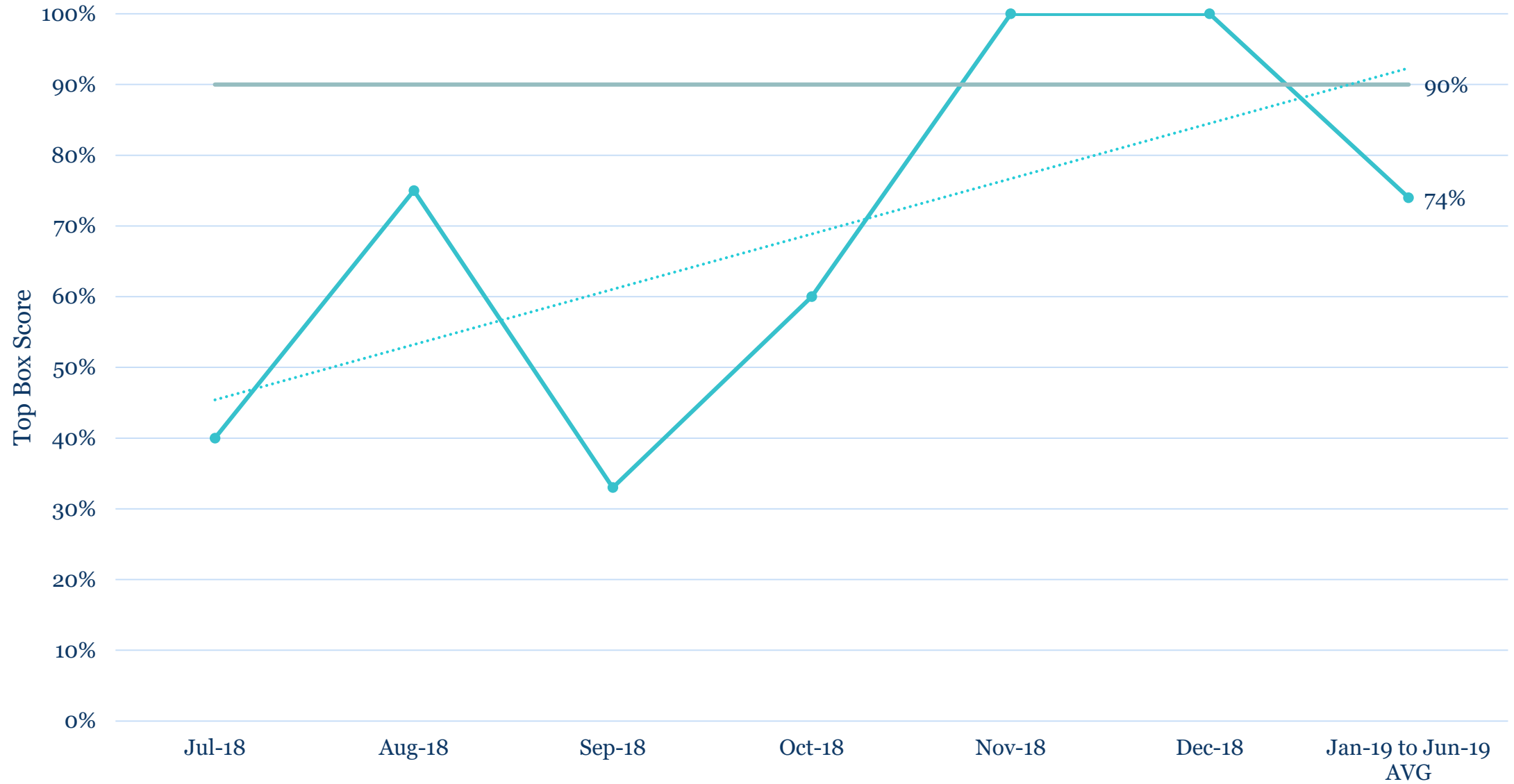


ACHN – Overall Clinic Assessment



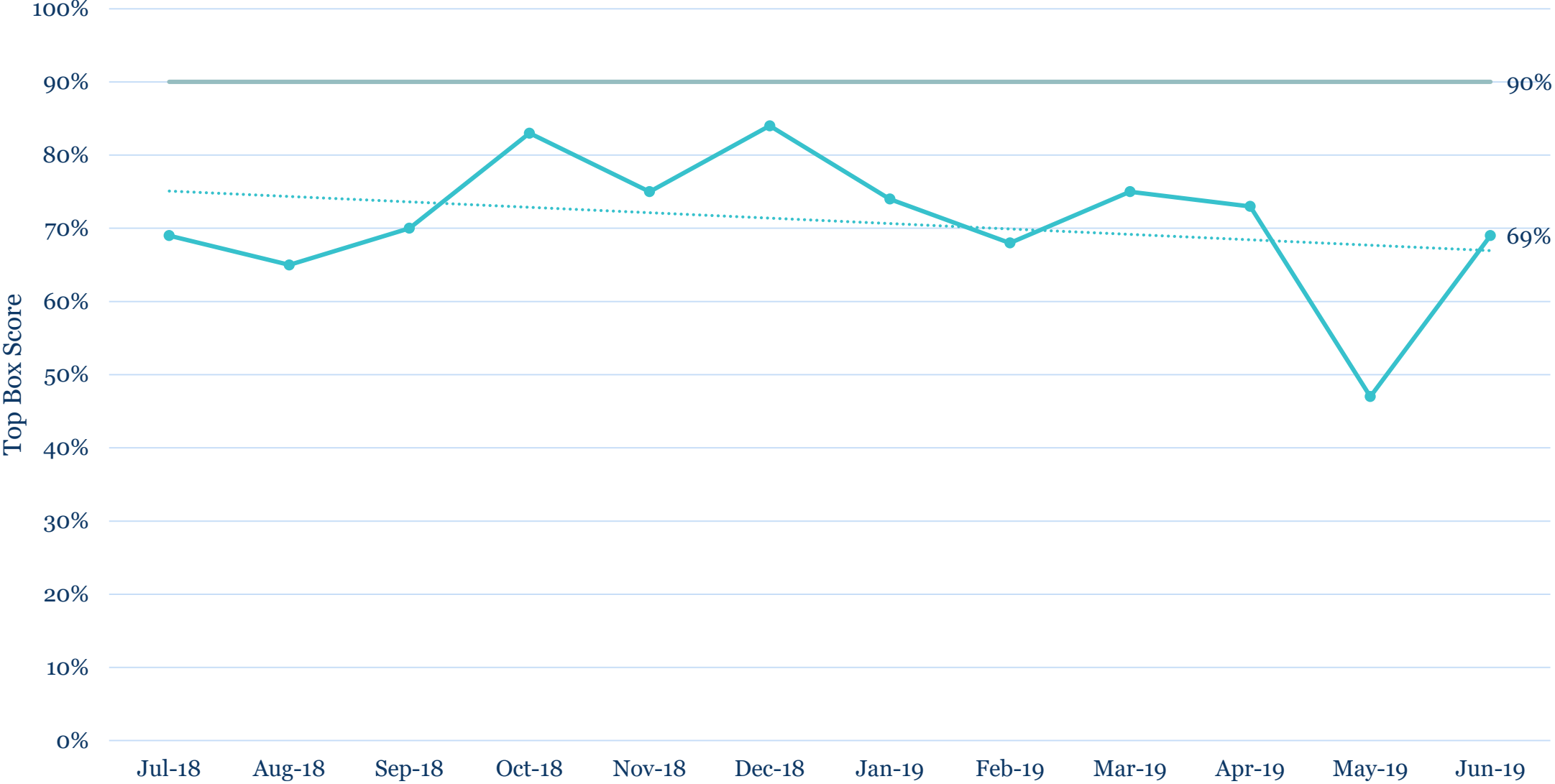
Source: Press Ganey

Provident – Willingness to Recommend the Hospital



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Stroger – Willingness to Recommend the Hospital



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